



Federal Update for March 9 - 13, 2015



VA Encourages Eligible Veterans to Apply for 2015 Veterans Summer Sports Clinic

Washington – The Department of Veterans Affairs (VA) is accepting applications from Veterans interested in participating in the 2015 National Veterans Summer Sports Clinic.

The 2015 National Veterans Summer Sports Clinic will be held Sept.13-18 at the VA San Diego Healthcare System in San Diego, California. The annual event is expected to attract Veterans from all over the country who have sustained a variety of injuries ranging from traumatic brain injury and polytrauma, to spinal cord injury or loss of limb.

“I encourage every Veteran who may be eligible to take advantage of this opportunity,” said VA Secretary Robert McDonald. “There is rehabilitative power in leading an active lifestyle and learning new skills and activities.”

The National Veterans Summer Sports Clinic represents VA’s continued commitment to offer adaptive sports and recreation therapy as an integral part of a successful rehabilitation program.

The deadline to apply for the 2015 National Veterans Summer Sports Clinic is May 1.

For more information or for an application, visit www.summersportsclinic.va.gov.

The 2015 National Veterans Summer Sports Clinic is sponsored by VA, the Veterans Canteen Service and other community organizations.

Kline Supports Bipartisan Legislation to Provide Choice for Veterans, Hold VA Accountable

WASHINGTON – Minnesota Congressman John Kline supported bipartisan veterans legislation that passed the U.S. House of Representatives this evening to expand health care choices for veterans and hold the Department of Veterans Affairs (VA) accountable by requiring bonuses collected under false pretenses be paid back in full.

“As I shared with Minnesota members of Disabled American Veterans (DAV) last week, we must continue to hold the VA accountable, and empower our veterans to take charge of their health care,” said Kline, a 25-year veteran of the U.S. Marine Corps. “The bipartisan legislation I

supported today gives more freedoms for our veterans in their health care decisions, and brings common sense reforms to the VA by requiring employees who collected a bonus under false pretenses to pay it back.”

The bipartisan legislation passed by the House this evening includes:

- The Long-Term Care Veterans Choice Act ([H.R. 294](#)) allows veterans to decide for themselves where and how to receive care, and provides a cost effective long-term care option for the VA. Under current law, the VA does not have the authority to pay for a veteran to receive care in a medical foster home, even if the veteran is eligible for VA-paid nursing home care. As a result, many service-connected veterans must pay out of pocket for care in a foster home, and many are unable to do so.
- Legislation authorizing the Secretary of Veterans Affairs to recoup bonuses and awards paid to employees of the Department of Veterans Affairs ([H.R. 280](#)) allows the Secretary of Veterans Affairs the authority to rescind any award or bonus paid to an employee of the VA. The bill requires that notice be given to the employee of the repayment, and the employee is afforded the opportunity to a hearing.

Congressman John Kline serves on the House Armed Services Committee. He also serves as the Chairman of the Education and the Workforce Committee. He and his wife, Vicky, live in Burnsville.

VA Accelerates Deployment of Nationwide Opioid Therapy Tool

Washington – The Department of Veterans Affairs (VA) is accelerating the deployment of a state-of-the-art tool to help protect Veteran patients using high doses of opioids or with medical risk factors that put them at an increased risk of complications from opioid medications.

The tool, referred to as the Opioid Therapy Risk Report, is being made available now to all staff in the Veterans Health Administration (VHA). Over the past week, VA’s Interim Under Secretary for Health, Dr. Carolyn Clancy, has reached out to over 2,000 primary care providers in VHA clinics throughout the country to promote the use of this novel tool. It includes information about the dosages of narcotics and other sedative medications, significant medical problems that could contribute to an adverse reaction and monitoring data to aid in the review and management of complex patients.

“All of American medicine is aiming to better understand how to treat severe pain, and Veterans receiving care in the VA health care system typically suffer from higher rates of chronic pain than the general public,” said Dr. Clancy. “While opioid medications may be appropriate in some cases of chronic pain, we are dedicated to using them safely and providing

effective pain care to our Veterans. It is critical that we ensure system-wide implementation of the Opioid Therapy Risk Report in the weeks ahead.”

The Opioid Therapy Risk Report allows VA providers to review all pertinent clinical data related to pain treatment in one place, providing a comprehensive Veteran-centered and more efficient level of management not previously available to primary care providers. VHA is actively deploying training aids to providers and facilities now and over the next several weeks to familiarize them with how to utilize this tool in their daily practice.

Overuse and abuse of prescription opioids is a significant public health issue, particularly since patients in pain are at risk for potential negative outcomes including unintended overdose, adverse medical reactions, and mental health complications. VA established the Opioid Safety Initiative (OSI) in 2012 to enhance safe and effective pain care for Veterans. As a result, there are currently:

- 91,614 fewer patients receiving opioids;
- 29,281 fewer patients receiving opioids and benzodiazepines together;
- 71,255 more patients on opioids that have had a urine drug screen to help guide treatment decisions;
- 67,466 fewer patients on long-term opioid therapy

Uniform Wearing Update ► Army Policy for Retirees

Wearing military medals on civilian clothing:

- Retired Soldiers are authorized by Army Regulation 670-1, Wear and Appearance of Army Uniforms and Insignia, to wear military medals on appropriate civilian clothing. This includes clothes designed for veteran and patriotic organizations on Veteran’s Day, Memorial Day, and Armed Forces Day, as well as at formal occasions of ceremony and social functions of a military nature. Personnel may wear either full-sized or miniature medals. Personnel who wear medals on civilian clothes should place the medals on the clothing in approximately the same location and in the same manner as for the Army uniform, so they look similar to medals worn on the Army uniform.

How to wear the Retired Service Identification Badge:

- The Retired Service Identification (ID) Badge will only be worn by Retired Soldiers when they wear the Army service or dress uniforms. Department of the Army Pamphlet 670-1, Guide to the Wear and Appearance of Army Uniforms and Insignia, says the badge is worn on the wearer’s left side. Also, no more than two ID badges may be worn on one pocket or side of the coat. The higher badge is worn on the wearer’s right. DA Pam 670-1 lists the order of precedence of all 12 Army ID badges in par. 22-17a. On males, ID badges are centered between the bottom of the pocket flap and the bottom of the pocket and from left to right. When two badges are worn on the same side, they are

spaced equally from left to right on the pocket. On females, ID badges are worn parallel to the waistline with one inch between badges when two are worn on the same side.

When Retired Soldiers are prohibited from wearing the Army uniform:

AR 670-1 (par. 3-7k, 23-1, and 23-3d) says Retired Soldiers are prohibited from wearing Army uniforms:

- When furthering any political or commercial interests, or when engaged in civilian employment.
- When participating in public speeches, interviews, picket lines, marches, rallies, or public demonstrations.
- When attending any meeting or event that is a function of, or is sponsored by, an extremist organization.
- When wearing the uniform would bring discredit upon the Army, as determined by the Commander.
- When specifically prohibited by Army regulations.
- When not on active duty but acting as an instructor or responsible for military discipline at an educational institution, unless the educational institution is conducting courses of instruction approved by the Armed Forces. [Source: ArmyEchoes | Feb 2015 ++]

SVAC Update: Senate VA leaders lay out goals, hopes to AL

The goals of the Senate Committee on Veterans' Affairs' leadership were made clear to Legion family members 24 FEB during their Washington Conference. Sen. Johnny Isakson, chairman of the committee, and Ranking Member Sen. Richard Blumenthal both spoke during the Commander's Call. Isakson said he had five goals for the 114th Congress: ensure the Veterans Choice Act works – "not to diminish the VA, but to enhance the VA" – ensure a seamless transition from Department of Defense to VA health care, address military sexual trauma for U.S. servicemembers, improve mental health services for veterans, and eradicate veterans homelessness.

"We've got to see to it that we have access to housing ... so that no single veteran goes to bed at night (in the United States) on a slab next to a bench or on steps off a building, but instead, they have warmth, they have food and they have support," Isakson said. "I'm going to see to it that I do everything I can to address ... homelessness. "And we're going to see to it that no veteran who has the stigma and pain and hurt of mental health illnesses from (traumatic brain injury) and (post-traumatic stress disorder) goes un-served or underserved. That is the goal of this committee and something I'm going to work on."

Blumenthal said the Legion's presence in the nation's capital "reminds us of the importance of what we do here for our veterans. This effort should continue to be bipartisan." He said of proof of successful bipartisanship came during passage of the Clay Hunt Act. "I co-sponsored

(the bill) with John McCain,” he said. “He and I worked together as a team (with others). This cause brings us together as Americans. I’m hoping that the Clay Hunt bill will be a template, a direction, an example for this Congress of how we can work together.” But Blumenthal said the Clay Hunt Act – and VA reform legislation that was passed – are both “only a down payment. It’s only a first step. The measures that are being made right now by (VA Secretary) Bob McDonald are very welcome ... are only the beginning. And I hope they will be followed by other steps, even more significant steps, so that the VA regains trust and credibility. It’s lost a lot.” Blumenthal said VA regaining trust is critical “because the challenges are going to be greater than ever before. Tens of thousands of men and women will be separating from the military over the next two to four years. They deserve job training, employment opportunities and health care.” [Source: The American Legion | Steve B. Brooks | Feb. 24, 2015 ++]

DoD Sexual Abuse Update ► DOD Registry Bill

The Defense Department would be required to publish a database of all convicted military sex offenders under new legislation introduced 12 FEB by House lawmakers. The bill, sponsored by Rep. Jackie Speier (D-CA) and Rep. Mike Coffman (R-CO) is aimed at closing a legal loophole allowing servicemembers to self-report their convictions to law enforcement — civilians are automatically added to such registries — while also making DOD sex crime records available to communities across the country. The lawmakers said they are concerned those convicted in courts martial are leaving the services and disappearing back into civilian life where their past is unknown. A recent investigation by the Scripps news service found that 242 military sex offenders out of 1,300 cases examined were never recorded on any public registry, despite a federal law that makes it a felony to ignore reporting requirements. “When you have somebody convicted of a sexual crime, the rate of recidivism is extremely high,” Coffman said. “Given the opportunity, they will reoffend.”

Speier said the bill creates a DOD registry for those convicted of rape, sexual assault and other sex-based offenses similar to the registries kept by local governments, states and law enforcement agencies across the country. The registries are designed to reduce repeat offenses by letting communities know if a sex offender is living nearby and what crimes they committed. Sex offenders are required to register immediately after their convictions or when they are released from prison and report to authorities where they live, work and go to school. The bill would add the global and often transient military community to the system by requiring the DOD to perform and publish its own registry, rather than relying on other civilian authorities to distribute the information. Speier said the DOD database would also include descriptions of each offender’s crimes beyond a list of military convictions such as “conduct unbecoming” that can obscure the nature of what was done. She recounted incidents in which a servicemember had several 12-year-olds walk on his chest in high heels, and touch his genitals. In another case, an airmen posed as a doctor and persuaded a woman to submit to pelvic exams even after a conviction for the same acts. She said that there was no projected cost for the database and new reporting.

Don Christensen, a retired Air Force prosecutor and president of the advocacy group Protect Our Defenders, also came out in support of the legislation, saying it would help solve a much bigger problem with reducing and prosecuting sexual assault in the ranks. “That makes this all the more absurd, that when we do bring these criminals to justice, they are essentially released into the civilian world and giving a clean slate,” he said. A similar registry bill was introduced in the Senate last week by Sen. Claire McCaskill (DMO) and Sen. Richard Burr (R-NC). That legislation calls for military sex offenders to be automatically added into the FBI’s National Crime Information Center. But that database is used primarily by law enforcement and not accessible by the public. [Source: Stars and Stripes | Travis J. Tritten | Feb. 12, 2015 ++]

TRICARE Choice Act of 2015 ► S.448 & H.R.868

Senators Jerry Moran (R-KS) and Richard Blumenthal (D-CO) both members of the Senate Veterans’ Affairs Committee, introduced the Veterans TRICARE Choice Act of 2015, S. 448, which would give TRICARE eligible veterans the ability to pause TRICARE benefits and contribute to a Health Savings Account (HSA).

The bipartisan bill addresses the inequities of current federal law, which prevents retired veterans from participating in their employer’s HSA program due to their eligibility for TRICARE. HSAs have proven to be an effective way to pay for medical costs and proactively save for future medical expenses. Employees invest and save tax-free money in HSAs, which are then used to pay for qualified medical expenses. Providing retired veterans with the option to either participate with their employer’s health plan and HSA or continue their TRICARE health plan not only benefits veterans, but also saves taxpayers money when their benefits are voluntarily paused. The House companion bill H.R. 868 was introduced by Reps. Chris Stewart (R-UT) and Tulsi Gabbard (D-HI). [Source: NAU Weekly Watchdog | Feb. 13, 2015 ++]

VA Blue Water Claims Update ► Bill Reintroduced / H.R.969

Congressman Chris Gibson (R-NY-19), a U.S. Army retiree, reintroduced The Blue Water Navy Vietnam Veterans Act in the House of Representatives on 13 FEB, along with 130 original House sponsors. Cosponsors are continuing to be added to that overwhelming bipartisan support. H.R.969 for this new Congressional Session, reads exactly like the previous H.R.543. When the last session ended in December, HR-543 had 258 cosponsors. It was not brought out of committee for a vote before that Congressional Session ended. On the Senate side, Sen. Gillibrand (D-NY) is ready to introduce an identical Senate legislation.

However, she is waiting for a Republican Senator to step out with her so there will be an initial bipartisan support. By the Blue Water Navy Vietnam Veterans Association’s reckoning, there are 20 or more Senators who will support that legislation. However, at least 50 will be needed to pass through the Senate.

One of the key factors that has been holding up this legislation has been the uncertainty of the final cost for treating all the sailors and fleet Marines who are sick with diseases recognized by the VA to have been caused by exposure to Agent Orange. Last week the Association's lawyer, retired Navy CDR John Wells, along with Congressman Gibson, met with key individuals from the Congressional Budget Office (CBO). They walked away from that meeting feeling very confident that the CBO would release a cost (score) that should fall into a dollar range acceptable to both House and Senate. But of course, everyone is saying that regardless of the cost they don't know where the money will be coming from. There have been two very important developments that will play in favor for passage.

- First, the pilots and crews of the Air Force reserve who inherited the airplanes that had been used in Vietnam to spray Agent Orange, have been steadily dying off from diseases that are on the Agent Orange list. But since they did not serve in wartime, they were not allowed to have Agent Orange related benefits. Their leader, retired Air Force Major Wes Carter, has been tenacious and recently the Institute of Medicine (IOM) returned a report to the VA that specifically stated these reservists were exposed to Agent Orange from the interior residue of Agent Orange on the fuselage that did cause their illnesses. The VA has not done anything with that information yet; however they have been backed into a corner. The report clearly stated two conditions that the VA has adamantly denied for 50 years: Agent Orange is persistent over time at a high toxicity rate, and it was capable of contaminating individuals who handled equipment that had been exposed.
- Secondly, there is now a case before the Court of Appeals for Veteran Claims where a decision must be made whether Da Nang harbor should be considered inland water. If the court rules in favor of that then as many as an estimated 80% of Blue Water Navy sailors could be affected and 80% of the cost of treating them is going to magically disappear from the legislation. This is because they will be put into a category of veterans who are required to be cared for under previously enacted and funded legislation. That hearing is scheduled to be concluded on 25 FEB. [Source: Salem-News.com | Blue Water Navy Vietnam Veterans Association | Feb. 16, 2015 ++]

Federal Recovery Coordination Program ► Vets Act H.R.914

U.S. Rep. Gwen Graham's first piece of legislation as a member of Congress would train and hire more recovery coordinators to help badly injured post-9/11 veterans. Graham hopes the VETS Act — Veterans, Education, Training Act — will improve veterans' ability to recover from war injuries by helping them better navigate government red tape to receive benefits. Recovery coordinators with the U.S. Department of Veterans Affairs assist seriously injured military members from active duty to veteran status. The coordinators help veterans find health care, housing and employment. Graham, who announced the legislation 18 FEB while standing with

North Florida veterans at Gulf Coast State College in Panama City, said it was “the least we can do for those who have served our country so admirably.”

Part of the legislation would require the VA work to establish recovery coordinator training curriculum in existing nursing schools like Florida State University, Tallahassee Community College and Florida A&M University. It would also allow the VA to increase the number of recovery coordinators and create a better system so that service members don’t “fall through the cracks.” “This legislation shows those who have served or are considering serving in the military that we have their backs,” Graham said. Graham introduced the bill (H.R.914) on 12 FEB. It is co-sponsored by Rep. Ken Buck, a Colorado Republican. Refer to <http://www.oefoif.va.gov/fedrecovery.asp> for information on VA’s involvement in this program. [Source: Tallahassee Democrat | Sean Rossman | Feb. 19, 2015 ++]

Following is a Summary of Veteran Related Legislation Introduced in the House and Senate Since the Last Bulletin was Published

- H.R.914: VA/DoD Federal Recovery Coordination Program Operation. A bill to direct the Secretary of Defense and the Secretary of Veterans Affairs to jointly operate the Federal Recovery Coordination Program, and for other purposes. Sponsor: Rep Graham, Gwen [FL-2] (introduced 2/12/2015)
- H.R.915: Voices for Veterans Act. A bill to amend title 38, United States Code, to extend and expand the membership of the Advisory Committee on Minority Veterans to include veterans who are lesbian, gay, or bisexual and veterans who are transgender. Sponsor: Rep DelBene, Suzan K. [WA-1] (introduced 2/12/2015)
- H.R.926: Vet Guide Dogs. A bill to amend title 38, United States Code, to improve the provision of guide dogs to veterans blinded by a service-connected injury. Sponsor: Rep Amodei, Mark E. [NV-2] (introduced 2/12/2015)
- H.R.941: Non-VA Department Health Care. A bill to amend the Veterans Access, Choice, and Accountability Act of 2014 to extend the requirement of the Secretary to furnish hospital care and medical services through non-Department of Veterans Affairs entities to veterans residing in certain locations. Sponsor: Rep Kuster, Ann M. [NH-2] (introduced 2/12/2015)
- H.R.969: Vietnam Agent Orange Exposure Amendment. A bill to amend title 38, United States Code, to clarify presumptions relating to the exposure of certain veterans who served in the vicinity of the Republic of Vietnam, and for other purposes. Sponsor: Rep Gibson, Christopher P. [NY-19] (introduced 2/13/2015)
- H.R.992 Disabled Vet Transportation Security Administration's PreCheck program. A bill to waive the application fee for veterans with a service-connected disability rated at 50 percent or more who apply to participate in the Transportation Security Administration's PreCheck program, and for other purposes. Sponsor: Rep Latta, Robert E. [OH-5] (introduced 2/13/2015)

- H.R.993: Vet Independent Living Services and Assistance Limit. A bill to amend title 38, United States Code, to repeal the limitation on the number of veterans authorized to be enrolled in programs of independent living services and assistance administered by the Secretary of Veterans Affairs. Sponsor: Rep Lujan Grisham, Michelle [NM-1] (introduced 2/13/2015)
- H.R.1016: VA Standard Identification Protocol. A bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to adopt and implement a standard identification protocol for use in the tracking and procurement of biological implants by the Department of Veterans Affairs, and for other purposes. Sponsor: Rep Roe, David P. [TN-1] (introduced 2/20/2015)
- H.R.1017: VA Information Security Improvement. To improve the information security of the Department of Veterans Affairs by directing the Secretary of Veterans Affairs to carry out certain actions to improve the transparency and the governance of the information security program of the Department, and for other purposes. Sponsor: Rep Walorski, Jackie [IN-2] (introduced 2/20/2015)
- H.R.1096: Clarify VA Reimbursable Mileage Computation. To amend the Veterans Access, Choice, and Accountability Act of 2014 to clarify the distance requirements regarding the eligibility of certain veterans to receive medical care and services from non-Department of Veterans Affairs facilities. Sponsor: Rep Byrne, Bradley [AL-1] (introduced 2/26/2015)
- S.471: Women Veterans Access to Quality Care Act of 2015. A bill to improve the provision of health care for women veterans by the Department of Veterans Affairs, and for other purposes. Sponsor: Sen Heller, Dean [NV] (introduced 2/12/2015)

[Source: <https://beta.congress.gov> & <http://www.govtrack.us/congress/bills> Feb. 27, 2015 ++]

Military Pay & Benefits Update ► Paycheck is Getting Smaller

Your military paycheck is getting smaller. It's happening despite raises in military pay every year, military advocacy groups warn. And they say it will keep shrinking if Pentagon officials get their way. Critics say the Pentagon's intensifying zeal to hold military raises under the rate of average private-sector wage growth is threatening to resurrect an old specter: a so-called "pay gap" that some say slowly drains away the purchasing power of military families. "It's insidious, because troops are still seeing a 'raise' in their pay," said retired Air Force Col. Mike Hayden, director of government relations for the Military Officers Association of America. "But your dollars don't go as far. You don't have the same discretionary income as before."

Over the years, Pentagon officials have consistently downplayed such concerns, saying basic pay is just one aspect of a robust pay-and-benefits package that stacks up very well against the private sector when considered in total, even with the recent smaller basic pay raises. During the rollout of the White House's 2016 defense budget request in early February, Air Force Lt. Gen. Mark Ramsay, the Defense Department's director of force structure and resources, sought

to reassure troops, stating: "We are all about our people." But, he added, "Dollars we saved in pay and compensation ... help balance out readiness and capability." Critics say that won't matter if troops feel unappreciated and leave the ranks. The Air Force Sergeants Association says the recent pay decisions have "re-opened the wound of a pay gap" and threaten retention.

The Association of the U.S. Army has labeled pay equity one of its top concerns in coming years. The 2016 defense budget request calls for a 1.3 percent increase in basic pay, 1 percentage point below the estimate of average private-sector wage growth next year. If approved, it would be the third consecutive year troops would get raises lower than their civilian counterparts. For 2014 and 2015, service members received a 1 percent bump in basic pay — the two smallest raises in the history of the all-volunteer force, dating back to 1973. Next year's proposed raise would be the second-smallest in that time period. According to MOAA's calculations, the gap has vanished only once, for a single year — 1982, when a massive 14.3 percent catch-up raise for the troops was approved in an effort to compensate for the parsimony of the 1970s. But in 1983 and beyond, military raises again lagged civilian pay growth to an extent that the gap grew as high as 13.5 percent in 1998 and 1999. Above-average raises again narrowed the gap over the first decade of this century, but it has never been smaller than 2.4 percent, from 2010 through 2013. This year, it has widened for the first time since 1999, growing to 3.2 percent.

MOAA and other critics estimate that a 1.3 percent basic pay raise next year that lags private-sector wage growth would widen the gap between military and civilian pay to around 5 percent, an annual salary difference of about \$1,500 for most midlevel enlisted troops and around \$3,000 for midlevel officers. And if the Pentagon's long-term plans are approved, that gap could rise steadily over the next four years, approaching double digits, MOAA says. Hayden noted that when the gap peaked at over 13 percent in the late 1990s, it took almost a decade of compensation corrections to deflate. "Once you start capping pay, it becomes so easy to keep doing it until you really hurt retention," he said. Hayden said MOAA is already hearing anecdotal evidence of troops bailing out of the service for civilian life mainly because of compensation trims.

Pentagon officials have repeatedly told Congress the lower pay raises are not ideal but are not crippling, and once again are disputing suggestions of a significant gap between military and civilian pay. They have also noted that a focus on troops' paychecks does not consider other pillars of military compensation such as housing benefits free health care and heavily discounted prices at base commissaries. However, the Pentagon's budget plan calls for further cutbacks in housing allowances so that troops cover about 5 percent of their costs out of their own pockets; suggests that prescription co-pays may rise again under the military's health plan; and seeks to trim back subsidies for commissaries, driving up prices and shortening store hours. In testimony before the Senate Armed Services Committee, incoming Defense Secretary Ash Carter noted that "compensation and benefit costs must be balanced with readiness and modernization requirements to ensure we maintain the highest quality, ready, and modern

military force." In coming weeks, Carter will return to Capitol Hill for more budget hearings at which he will defend the lower pay raise proposal.

Last year, House members pushed to have the military pay raise at least match private-sector wage growth, but accepted a lower pay raise after negotiations with the Senate. Members of both chambers promise a fresh look at the issue this year, along with the long-term personnel changes recommended in the Military Compensation and Retirement Modernization Commission report. Hayden said he is hopeful that his and other groups can successfully lobby lawmakers to block the Pentagon plans this year, even while military leaders argue that the billions saved by the pay changes over coming years could fill critical needs elsewhere. "The question is, when is enough going to be enough?" Hayden said. "We need the military to speak out about the negative impact this has on their wallets too. Once you start trimming back on pay, you're starting to threaten readiness." [Source: MilitaryTimes | Leo Shane | Feb. 16, 2015 ++]